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	PAT	ENT APPLIC		I FEE DETE Ite for Form PT		N RECORD		Applicati	on or Docket Nu	mber
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OR	OTHER THAN SMALL ENTITY	
	FOR	NUMBE	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
BASIC FEE 37 CFR 1.16(a))							\$	OR		\$
OTAL CLAIMS 37 CFR 1.16(c))			minus 20 = •			x \$ =		OR	x \$ =	
NDEPENDENT CLÁIMS 37 CFR 1.16(b))		MS	minus 3 = *			x \$ =		OR	x \$ =	
-		NT CLAIM PRESEN		37 CFR 1.16(d))						
-	TIFLE DEFENDE	INT CLAIM PRESE	VI (.	57 CFR 1.10(d))		+ \$=		OR	_ + \$ =	
if ti	1 .	column 1 is less that			e/ec	TOTAL		OR	TOTAL OTHER	THAN
_	119/10	(Column 1)		(Column 2)	(Column 3)	SMALL E	NTITY	OR I	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	. 45	Minus	" 81	=	x \$		OR	x \$=	
	Independent (37 CFR 1.16(b))	. 3	Minus	··· 7	=	x \$ =		OR	x s =	
	FIRST PRESENT	ATION OF MULTIPL	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))			OR		
						+ \$= TOTAL ADD'L FEE		OR	+ \$ = TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1,16(c))	*	Minus	**	=	x \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x \$ =		OR	x \$ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))									
	THOT INCOLIN	Andrei Moenie		Der Gerin (Gron	1. 1. 10(0))	+ \$= TOTAL ADD'L FEE		OR OR	+ \$= TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			•	'	
)		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
₹I	Total (37 CFR 1,16(c))	*	Minus	##	=	x \$=		OR	X \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	Ŕ	Minus	***	=	x \$ =		OR	x \$ =	
اغ										
۲	TINGT PRESENT	AHON OF WILLIPL	C OEFENDI	_11, CEAN (37 CF	1.10(u))	+ \$= TOTAL		OR	+ s= TOTAL	
		olumn 1 is less tha	41.			ADD'L FEE		OR	ADD'L FEE	L

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.